Maricopa County Justice Courts, State of Arizona

CASE NUMBER:			
		_	
Plaintiff(s) Name /	Address / Phone	_	Defendant(s) Name / Address / Phone
SMALL CLAIMS REQUEST FOR CONTINUANCE			
ARS 22-515. Continuances C. "Continuances of hearing and the Plaintiff Plaintiff	_	-	nost serious of reasons." I request a continuance because:
Attached is supporting documentation for my request.			
	,	·	
Date:		Plaintiff	Defendant
ORDER and NOTICE OF HEARING DATE			
A request for continuance of the small claims hearing has been filed,			
<u> </u>	_		OF NEW HEARING DATE:
Date			Time
IT IS ORDERED,	enying the request.	The hearing	g date remains as previously scheduled.
Date:	Justid	ce of the Pe	eace
I CERTIFY that I mailed a copy of this ORDER and NOTICE OF HEARING DATE to:			
Plaintiff at the above address		☐ Def	endant at the above address
Date:		Ву:	